

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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45						
46						
47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55	1					
56		1				
57			1			
58				1		
59					1	
60						1
61			1			
62				1		
63					1	
64						1
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75	1					
76		1				
77			1			
78				1		
79					1	
80						1
81						
82						
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	4					
TOTAL DEP.	33					
TOTAL CLAIMS	37					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS